


Clear Form

<b>UNITED STATES DISTRICT COURT</b> <b>NORTHERN DISTRICT OF CALIFORNIA</b> <small>CAND 435</small> <small>(CAND Rev. 02/2015)</small>				<b>TRANSCRIPT ORDER</b> Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.				<b>COURT USE ONLY</b> <b>DUE DATE:</b>						
1a. CONTACT PERSON FOR THIS ORDER <b>Jana L. Contreras</b>				2a. CONTACT PHONE NUMBER <b>(925) 935-9400</b>				3. CONTACT EMAIL ADDRESS <b>jana.contreras@msrlegal.com</b>						
1b. ATTORNEY NAME (if different) <b>Jana L. Contreras</b>				2b. ATTORNEY PHONE NUMBER <b>(925) 935-9400</b>				3. ATTORNEY EMAIL ADDRESS <b>jana.contreras@msrlegal.com</b>						
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) <b>Jana L. Contreras, Miller Starr Regalia, 1331 N. California Blvd., Fifth Floor, Walnut Creek, CA 94596</b>				5. CASE NAME <b>US v. Ayman Shahid</b>				6. CASE NUMBER <b>4:14-cr-00271-YGR</b>						
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) → <input type="checkbox"/> FTR <b>Diane Skillman</b>				8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL    CJA: Do not use this form: use Form CJA24.										
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:														
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)				c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION (If requesting less than full hearing, specify portion (e.g. witness or time))	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
03/16/2017	YGR	Sen		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:														
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 11. SIGNATURE 												12. DATE <b>03/17/2017</b>		
DISTRIBUTION:				<input type="checkbox"/> COURT COPY <input type="checkbox"/> TRANSCRIPTION COPY <input type="checkbox"/> ORDER RECEIPT <input type="checkbox"/> ORDER COPY										